DECLARATION FOR PATENT APPLICATION WITH POWER OF ATTORNEY

Docket: 14498 B (CFP-2415)

next to my name; I be joint inventor (if plura invention entitled	elieve that I am the or al names are listed	by declare that my reside iginal, first and sole inverseled inverseled inverseled in the subject market TRA	ntor (if only one national distribution of the intermediate of the	ned and for which	ch a patent is sought VING DEVICE	ii St ailu
as Application S	was filed on(or amended through, if					
applicable). I hereby claims, as amended to the patentability of pnority benefits under a filing date before t	state that I have revi by any amendment(s this application in acc r Title 35, United Sta	iewed and understand the symmetric that the symmetric transfer is a cordance with Title 37, Coutes Code, §119 of any for on which priority is claim	e contents of the knowledge the di ode of Federal Re oreign application	above identified uty to disclose in equiations, §1.5	nformation which is r 6(a). I hereby claim	naterial foreign
PhorPor		Priority Claimed				
(Number)	(Country)	(Day/Month/Year I	iled)		Yes	No
(Number)	(Country)	(Day/Month/Year I	iled)	*.	Yes	No
(Application Serial No.) (Filing Date) (Status—Patented, Pending or Abandoned) I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. POWER OF ATTORNEY I (we) hereby appoint Charles E. Baxley, USPTO Reg. No. 20,149, whose Post Office address is: Hart, Baxley, Daniels & Holton, 90 John Street, 3rd Floor, New York, New York 10038, Tel: (212) 791-7200, Fax: (212) 791-7276. as my (our) attorney with full powers of substitution and revocation, to prosecute this application, and to transact all						
business in the Pa	atent and Tradema	rk Office connected the	erewith.			
Full name of First	or Sole Inventor		Citizenship			
JOHNSON Y	ANG		TAIWANE	SE		
Residence Addre	ss - Street		Post Office Add			
NO.93-1,CIA	NOHE RD.,		NO.93-1, C	IAOHE RD.		
City (Zip) JHONGHE CITY, TAIPEI COUNTY,			City (Zip) JHONGHE CITY, TAIPEI COUNTY,			
	.,	J. T. F.	State or Count			
State or Country TAIWAN, R.O.C.			TAIWAN, R.O.C.			
Date	AY 2004		Signature ()	\	lang	
			U		X	

☐ See second page for additional joint inventors.